Page 1 of 2

DECLARATION	HTH IT	/ OR	Attorney Do	cket Number	216224-00043	rage 1012			
DESIGN PATEN		- " "	First Named		JOHN N. DE (A VICTORIA			
(37 CF						ETE IF KNOWN	H VERSVE		
		Declaration Submitted after Initial Filing.	Submitted	Application I		09/773,524			
Declaration Submitted with Initial Filing				Filing Date	tunio.	February 2, 20	<u></u>		
	161		Art Unit		Unassigned	V 1			
			Examiner Na	eme	Unassigned				
AS THE DELONG MARGE	3 10D/E		-			Onassigned			
AS THE BELOW NAMED									
My residence, mailing address, I believe I am the original and fi entitled:		•		•		patent is sought on th	e invention		
MI					FILIZING THE	FULL			
CAPACITY OF A PARTICULAR TYPE OF									
MINE HOIST FOR EXCAVATING DEEP SHAFTS									
is attached hereto									
— lo diadrica ficicio									
or			·						
was filed on (MM/DD/YYYY) February 2, 2001 as United States Application Number or PCT International									
Application Number 09/773,524 and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-									
in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
PRIORITY INFORMATION:									
I hereby claim domestic priority		under 35 US	SC 119(e) of a	any provisiona	l annlication lister	helow			
I hereby claim domestic priorit							CT international		
application designating the Unit	ed State	es listed belov	w.	a.,, a.,,	totoo appiroanon,	, 0. 000(0) 0. 0.1	or medinational		
I hereby claim foreign priority be breeder's rights certificate, or 3 States of America, listed below plant breeder's rights certificate is claimed.	65(a) of and ha	any PCT interve also ident	ernational ap tified below, I	plication which by checking th	n designated at lea ne box, any foreign	ast one country other n application for pate	than the United nt. inventor's or		
Prior Domestic or Foreign Application Number(s)	C	Country		Date D/YYYY)	Priority Claime	(for FORE	oy Attached? IGN only)		
004000			.		•	YES	NO		
60/180,044		USA	Februar	y 3, 2000	Yes		No		
		**************************************		M					
	<u> </u>								
additional domestic a	and/or fo	reign applica	tion numbers	are listed on	a supplemental pr	iority data sheet attac	hed hereto.		

Page 2 of 2

DECLARATION – UTILITY OR DESIGN PATENT APPLICATION											
CORRESPONDENC	E ADDRES	SS:									
Direct all correspondence	to: 🗷	Customer Number or Bar Code Label	27160	or		Corresp	ondence address below				
Name	····										
Address	/////////////////////////////////////										
City	****	State			Zip						
Country	Telephone			***************************************		Fax					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
NAME OF SOLE OR FIRST INVENTOR:			☐ A petiti	☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle): JOHN N.			Family Nar Surname:	Family Name or OC 14 VEDCNE							
Inventor's Signature: The de la Visque			Date:								
Residence: /											
City	State		Country		Citi	izenship	Canadian				
Mailing Address:				·							
Street 676 Cooks N	/lill Road										
City North Bay	State		Zip		Co	untry	Canada				
NAME OF SECOND INVENTOR:			☐ A petiti	\square A petition has been filed for this unsigned inventor							
Given Name (first and middle):			Family Nar Surname:	Family Name or Surname:							
Inventor's Signature:			Date:	Date:							
Residence:											
City	ity State			Country			Citizenship				
Mailing Address:											
Street											
City	State		Zip	Zip			Country				
NAME OF THIRD IN	IVENTOR:		☐ A petiti	on has been f	iled for th	is unsigned	d inventor				
Given Name (first and middle):			Family Nar Surname:	Family Name or Surname:							
Inventor's Signature:			Date:	Date:							
Residence:											
City	State			Country Citizenship							
Mailing Address:											
Street											
City	State		Zip	Zip Country							
☐ Supplemen	ital Additional	Inventors(s) Sheets(s) are	e attached here	eto.							